| ...ON | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| **FEE DETERMINATION** | K H | | 11/19/10 |
| **O.I.P.E. CLASSIFIER** | | 21 | 11/31/01 |
| **FORMALITY REVIEW** | ß | 1084 | 1/16/02 |
| **RESPONSE FORMALITY REVIEW** | | | |
| | | | |

## INDEX OF CLAIMS

| | | | | |
|---|---|---|---|---|
| ✔ | ................................. Rejected | N | ................................. Non-elected |
| = | ................................. Allowed | I | ................................. Interference |
| — | (Through numeral)... Canceled | A | ................................. Appeal |
| ÷ | ................................. Restricted | O | ................................. Objected |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)